

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001019

FILED
Jan 03, 2006
Secretary of State

Entity Name: GREATER HALIFAX WORSHIP CENTER, INC.

Current Principal Place of Business:

1050 DERBYSHIRE ROAD
DAYTONA BEACH, FL 32117

New Principal Place of Business:

Current Mailing Address:

1485 U.S. 1 SOUTH
SAINT AUGUSTINE, FL 32084

New Mailing Address:

1050 DERBYSHIRE ROAD
DAYTONA BEACH, FL 32117

FEI Number: 59-3502817

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TINSLEY, DONAVAN E PRES
1485 U.S. 1 SOUTH
SAINT AUGUSTINE, FL 32084 US

Name and Address of New Registered Agent:

WILLIAMS, GENE PRES
1050 DERBYSHIRE ROAD
DAYTONA BEACH, FL 32117 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: GENE WILLIAMS

01/03/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: TINSLEY, DONAVAN E
Address: 1485 U.S. 1 SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: VP () Delete
Name: WILSON, KRISTOPHER P
Address: 1485 U.S. 1 SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D () Delete
Name: SMITH, CLIFTON
Address: 7 W MAIN ST SUITE 300
City-St-Zip: APOPKA, FL 32703

Title: D () Delete
Name: HATLEY, RALPH
Address: 313 SUNSET
City-St-Zip: HOLLY HILL, FL 32174

Title: SEC (X) Delete
Name: WILSON, TESSA
Address: 1485 U.S. 1 SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: TREA (X) Delete
Name: TINSLEY, NELLIE T
Address: 1485 U.S. 1 SOUTH
City-St-Zip: SAINT AUGUSTINE, FL 32084

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: WILLIAMS, GENE
Address: 1050 DERYSHIRE ROAD
City-St-Zip: DAYTONA BEACH, FL 32117

Title: S/T (X) Change () Addition
Name: WILLIAMS, PATRICIA
Address: 1050 DERBYSHIRE ROAD
City-St-Zip: DAYTONA BEACH, FL

Title: VP (X) Change () Addition
Name: SMITH, CLIFTON
Address: 7 W MAIN ST SUITE 300
City-St-Zip: APOPKA, FL 32703

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GENE WILLIAMS

PRES

01/03/2006

Electronic Signature of Signing Officer or Director

Date